24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
PACPLUS	C C00516500
Check If X 24-hour report 48-hour report New report Amends report file	ed on M M / D D / Y B Y B Y
Full Name (Last, First, Middle Initial) of Payee Smith-Edwards-Dunlap Company Mailing Address 2867 East Allegheny Ave.	Date 08 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Amount
City State Zip Code Philadelphia PA 19134	1815.00 Transaction ID : SE.8890
Printing of 25,000 cards Type 006	fice Sought: House State: NJ Senate District: President
Name of Federal Candidate Supported or Opposed by Expenditure: Cory Booker Ch	neck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Diagram 28665.56	sbursement For: Primary General Other (specify) Special-Primary
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type Of	ffice Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Ch	President Oppose
Calendar Year-To-Date Per Election for Office Sought	sbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1815.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1815.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Lisa Le [Electronically Filed] Date	08 03 2013
Orginator	